| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | _CM_ | _45—_ | _4/15_ |
| RESPONSE FORMALITY REVIEW | | | |
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## INDEX OF CLAIMS

✔ ...................................... Rejected
= ...................................... Allowed
– (Through numeral)... Canceled
÷ ...................................... Restricted

N ...................................... Non-elected
I ...................................... Interference
A ...................................... Appeal
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If more than 150 claims or 10 actions
staple additional sheet here

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